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Adjustment date: 10/24/2005 TBSHAH2
10/24/2005 DENMANUE 00000059 09561100
01 FC:1501 7590 -108/01/2005P
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HAMILTON, BROOK, SMITH & REYNOLDS, P.C.
530 VIRGINIA ROAD
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Donna Bartolone	(Depositor's name)
<i>Donna Bartolone</i>	(Signature)
10-18-05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/802,128	03/08/2001	Dale E. Wright	2479.2049-000	5572

TITLE OF INVENTION: RESOURCE UTILIZATION EFFICIENCY DURING HAND-OFF IN MOBILE COMMUNICATION SYSTEMS

10/24/2005 TBSHAH2 00000059 09561100

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APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	11/01/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
PHUNKULH, BOB A	2661	370-331000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Hamilton, Brook, Smith
& Reynolds, P.C.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

IPR Licensing, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Wilmington, DE

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 15

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- ☒ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized to charge the required fee(s) or credit any overpayment Deposit Account Number 08-0380 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Michael J. Badzinski

Date

10/18/05

Typed or printed name

Michael J. Badzinski

Registration No.

51,425

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